

OCT 26 2010

# VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

|  |  |                      |  |
|--|--|----------------------|--|
| Supervisor/Operator Performing the Verification Procedure: |  | DataMaster cdm S/N   | <u>130179</u> ✓                        |
| Name   | <u>V. Eugene Fowler</u>                          | ID#                  | <u>4386</u> ✓ Date <u>10-23-10</u> ✓   |
| A Agency   | <u>Alaska State Troopers</u>                     | Phone #              | <u>262-4453</u>                        |
| Instrument Location  | <u>Sokhta AST Post</u>                           |                      |  |
| B Alco S/N   | <u>57447</u> ✓                                   | Target Value         | <u>.084</u> ✓ High Pressure <u>250</u> |
| Alco Test Value Average                                    | <u>.083</u> <sup>.084</sup> <sub>11/8/2010</sub> | <u>.084</u>          |  |
|  | 1 <sup>st</sup> Alco                             | 2 <sup>nd</sup> Alco |  |
| Signature  | <u>V. E. Fowler</u>                              |                      |  |
| (OVER)   |  |                      |  |

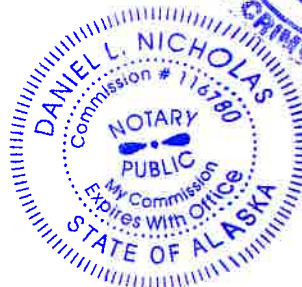
I, Nita J. Bolz, after being first duly sworn, depose and state as follows: (Do Not write in the area below)

- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J. Bolz  
Scientific Director  
State Breath Alcohol Program

Subscribed and sworn before me this 21<sup>st</sup> day of DEC, 2010.

Daniel L. Nicholas (Notary Seal Stamp)  
Daniel L. Nicholas  
Notary Public, State of Alaska  
Commission Expires with Office



*Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program*

(CONTINUED FROM FRONT PAGE)

C TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

## DIAGNOSTIC CHECK

```
"#02" - "A123456789;X=70ABCDEF6  
HIJKL NOPQRSTU" -> "^\^'abcde-fghijklmno  
pqrstuvwxyz"
```